

B1 (Official Form 1)(04/13)

United States Bankruptcy Court Northern District of Georgia		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Owensby, Kenneth Lamar		Name of Joint Debtor (Spouse) (Last, First, Middle): Owensby, Catherine Veal
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) xxx-xx-7255		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-7206
Street Address of Debtor (No. and Street, City, and State): 105 Lexington Park Drive Lagrange, GA <div style="text-align: right;">ZIP Code 30241</div>		Street Address of Joint Debtor (No. and Street, City, and State): 105 Lexington Park Drive Lagrange, GA <div style="text-align: right;">ZIP Code 30241</div>
County of Residence or of the Principal Place of Business: Troup		County of Residence or of the Principal Place of Business: Troup
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurring by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input type="checkbox"/> Full Filing Fee attached <input checked="" type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (<i>amount subject to adjustment on 4/01/16 and every three years thereafter</i>). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Owensby, Kenneth Lamar
Owensby, Catherine Veal**All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **NEWNAN**

Case Number:

14-11248

Date Filed:

6/05/14

Location

Where Filed: **See Attachment**

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

Case Number:

Date Filed:

- None -

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ H. Brooks Cotten**May 5, 2015**

Signature of Attorney for Debtor(s)

(Date)

H. Brooks Cotten 189545**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)_____
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Owensby, Kenneth Lamar
Owensby, Catherine Veal

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Kenneth Lamar Owensby

Signature of Debtor **Kenneth Lamar Owensby**

X /s/ Catherine Veal Owensby

Signature of Joint Debtor **Catherine Veal Owensby**

Telephone Number (If not represented by attorney)

May 5, 2015

Date

Signature of Attorney*

X /s/ H. Brooks Cotten

Signature of Attorney for Debtor(s)

H. Brooks Cotten 189545

Printed Name of Attorney for Debtor(s)

H. Brooks Cotten, P.C.

Firm Name

5 Jackson Street
Newnan, GA 30263

Address

Email: cottenlaw_ecf@yahoo.com

770-683-3303 Fax: 770-683-3304

Telephone Number

May 5, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X _____

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

In re **Kenneth Lamar Owensby,
Catherine Veal Owensby**

Case No. _____

Debtors

FORM 1. VOLUNTARY PETITION
Prior Bankruptcy Cases Filed Attachment

Location Where Filed

**Newnan
NEWNAN**

Case Number

**09-12767
09-11637**

Date Filed

**08/06/09
05/05/09**

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
Northern District of Georgia**

In re **Kenneth Lamar Owensby
Catherine Veal Owensby**

Debtor(s)

Case No.
Chapter

13

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☐ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☒ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Kenneth Lamar Owensby
Kenneth Lamar Owensby

Date: May 5, 2015

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
Northern District of Georgia**

In re **Kenneth Lamar Owensby
Catherine Veal Owensby**

Debtor(s)

Case No.
Chapter

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☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Catherine Veal Owensby
Catherine Veal Owensby

Date: May 5, 2015

Amcol Systems, Inc.
for Medical Payment Data
111 Lancewood Road
Columbia, SC 29210

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for Medical Payment Data
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Columbia, SC 29210

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for Medical Payment Data
111 Lancewood Road
Columbia, SC 29210

American InfoSource LP
for DirecTV
PO Box 51178
Los Angeles, CA 90051-5478

Calvary Portfolio Service
for Cap One
P.O. Box 27288
Tempe, AZ 85282-7288

Capital One
P.O. Box 71083
Charlotte, NC 28272-1083

Capital One
P.O. Box 71083
Charlotte, NC 28272-1083

Capital One Bank
P.O. Box 85520
Richmond, VA 23285

Cavalry SPV I, LLC
for Capital One Bank
500 Summit Lake Dr, Ste 400
Valhalla, NY 10595

CBSI
550 Greensboro Avenue
Tuscaloosa, AL 35401

Cedar Rock Outdoors
12261 White House Pkwy
Woodbury, GA 30293

Cerastes, LLC
c/o Weinstein, Pinson and Rile
2001 Western Ave, Ste 400
Seattle, WA 98121

Classic Finance of Roanoke
c/o Joe Lett, owner
1133 Main Street
Roanoke, AL 36274

Classic Finance of Roanoke
c/o Joe Lett, owner
3355 US Hwy 431, Ste 10
Roanoke, AL 36274

Credit Central
700 E. North Street
Suite 15
Greenville, SC 29601-3013

Credit Financial Service
Columbus Consolidated Parking
100 W. Morgan Street
Durham, NC 27701

Credit Financial Service
Columbus Consolidated Parking
100 W. Morgan Street
Durham, NC 27701

Credit Management LP
4200 International Pkwy
Carrollton, TX 75007

Diversified Consultants, Inc.
for Sprint
10550 Deerwood Park Blvd
Jacksonville, FL 32256

Ed Davis
3461 Hammett Road
Hogansville, GA 30230

Financial Asset Management
for Medical Payment Data
P.O. Box 451409
Atlanta, GA 31145

First Premier Bank
P.O. Box 5524
Sioux Falls, SD 57117-5524

First Premier Bank
P.O. Box 5524
Sioux Falls, SD 57117-5524

First Premier Bank
601 S. Minnesota Avenue
Sioux Falls, SD 57104

Franklin Collection Service
for Medical Payment Data
P.O. Box 3910
Tupelo, MS 38803-3910

Gil's Auto Sales
5115 14th Street
Columbus, GA 31904

Gil's Auto Sales
5115 14th Street
Columbus, GA 31904

GoldCar Lending-Gils Auto
3962 U SHwy 80 W Bld A
Phenix City, AL 36870

GoldCar Lending-Gils Auto
3962 U SHwy 80 W Bld A
Phenix City, AL 36870

Holloway Credit Solutions
for Medical Payment Data
P.O. Box 230609
Montgomery, AL 36123-5609

Holloway Credit Solutions
for Medical Payment Data
P.O. Box 230609
Montgomery, AL 36123-5609

Jefferson Capital Systems
P.O. Box 7999
Saint Cloud, MN 56302

Lagrange Loans
c/o Cora Pleasant, B.Manager
900 Hogansville Road, Ste A
Lagrange, GA 30241

Lagrange Loans
c/o Cora Pleasant, B.Manager
900 Hogansville Road, Ste A
Lagrange, GA 30241

Lake Carroll Auto Sales
909 Bankhead Highway
Carrollton, GA 30117

MBC
for Medical Payment Data
11701 Belcher Rd S Ste 1
Largo, FL 33773

Medical Payment Data
Medical Payment Data
2001 9th Ave., Ste 312
Vero Beach, FL 32963-6413

Merrick Bank
c/o Resurgent Capital Services
PO Box 10368
Greenville, SC 29603

Portfolio Recovery Associates
Attn: Delores Garcia
P.O. Box 41067
Norfolk, VA 23541

Premier Bankcard/Charter
POB 2208
Vacaville, CA 95696

Quantum3 Group LLC
CP Medical LLC
P.O. Box 788
Kirkland, WA 98083-0788

Region/AMS
P.O. Box 11007
Birmingham, AL 35288

Security Finance
c/o Kerri Williams, br mgr
127 Commerce Ave. Suite C1
Lagrange, GA 30240

Security Finance
c/o Amanda Haney, Manager
159 Temple Avenue, Ste E
Newnan, GA 30263

SFC Central BK & Recovery
PO Box 1893
Spartanburg, SC 29304-1893

Sprint
Attn: Bankruptcy Dept
P.O. Box 7949
Cincinnati, OH 45274-0602

Strickland's Texaco
514 Second Ave.
West Point, GA 31833

The Law Offices of MIT
for Medical Payment Data
2222 Texoma Pkwy, Ste 160
Sherman, TX 75090

The Orthopaedic Clinic
c/o Franklin Collection Svc
PO Box 3910
Tupelo, MS 38803

WEBBANK/Fingerhut
1 Dell Way
Round Rock, TX 78682

West Ga Medical Center
c/o Sandy Titus, patient svcs
1514 Vernon Road
Lagrange, GA 30240